



# Department of State

# TELEGRAM

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ACTION RP-10

INFO OCT-01 NEA-06 10-14 ADS-00 SR-04 SSO-00 AID-07  
COMP-01 OMB-01 TRSE-00 FS-01 HA-05 1050 W

-----043043 031033Z /23

O R 020730Z MAR 80  
FM AMEMBASSY ISLAMABAD  
TO SECSTATE WASHDC IMMEDIATE 7164  
INFO USMISSION GENEVA  
AMCONSUL KARACHI  
AMCONSUL PESHAWAR POUCH

DEPARTMENT OF STATE A/CDC/MR	
REVIEWED BY <i>[Signature]</i>	DATE <i>2/1/86</i>
EDS <input type="checkbox"/> or XDS <input type="checkbox"/> EXT. DATE	
TS AUTH. <i>[Signature]</i>	REASON(S) <i>[Signature]</i>
ENDORSE EXISTING EXEMPTIONS <input type="checkbox"/>	
DECLASSIFIED <input checked="" type="checkbox"/> DECLASSIFIED	
RELEASE <input checked="" type="checkbox"/> PENDING	
PA OR FOI EXEMPTIONS	

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E.O. 12065: NA  
TAGS: GREF PK  
SUBJECT: AFGHAN REFUGEES HEALTH SITUATION

REF: (A) ISLAMABAD 1522 (B) STATE 53910 (C) ISLAMABAD 1793

1. THE LATEST MEETING AMONG UN, VOLAGS, AND GOP ON AFGHAN REFUGEE HEALTH SITUATION WAS HELD ON MARCH 1, AND WHILE STILL VAGUE ON A COHERENT HEALTH STRATEGY, SEEMED TO SHOW SOME MOVEMENT ON THE ISSUE OF FOREIGN DOCTORS IN THE CAMPS. TWO OF THOSE PRESENT AT THE MEETING, UNHCR REP KOHAUT AND CWS REP CALLAHAN, SAID THEY THOUGHT SOME HEALTH MINISTRY OFFICIAL ALL BUT ADMITTED THAT THE GOP CANNOT MAN THE HEALTH PROGRAM, ESPECIALLY THE FEMALE HEALTH WORKER COMPONENT, WITH LOCAL HEALTH MANPOWER. JOINT SECRETARY COL. BABAR WAS REPORTEDLY VERY EFFECTIVE IN TRYING TO PIN DOWN THE HEALTH MINISTRY TO SOME DEFINITE STATEMENT ON THE MATTER AND ALMOST SUCCEEDED.

2. ON THE MORE GENERAL HEALTH PROGRAM, THE MEETING WAS VERY MUCH LIKE THE PREVIOUS MEETINGS (REF A). THE FEDERAL GOVERNMENT CONTINUES TO WAIT FOR PROVINCIAL INPUTS WHICH, SO FAR, HAVE BEEN INCOMPLETE AND NOT VERY WELL THOUGHT

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OUT. KOHAUT IS DETERMINED TO GO TO QUETTA AND PESHAWAR TO

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WORK OUT PERSONALLY THE PROVINCIAL HEALTH PROGRAMS WITH THE PROVINCIAL SECRETARIES.

3. TO DATE, KOHAUT'S THINKING, WHICH SEEMS TO MIRROR DONORS AND GOP THINKING, IS TO HAVE ONE TRANSPORTABLE TENT DISPENSARY FOR EACH 5000 PEOPLE (WHICH MAY INVOLVE ONE CAMP OR A GROUP OF CAMPS) STAFFED BY A PARAMEDICAL TEAM INCLUDING A LADY HEALTH VISITOR. THE TENT DISPENSARIES WOULD BE LINKED BY MOBILE MEDICAL UNITS, STAFFED BY AT LEAST ONE DOCTOR. IT IS THE DETAILS OF THIS PLAN, PARTICULARLY THE STAFFING, THAT KOHAUT WANTS TO FLESH OUT IN THE PROVINCIAL CAPITALS.

4. REGARDING THE TIMES MENTIONED IN REF B, PARA 3, A, B, AND C, KOHAUT SHARES OUR CONCERN AND SAYS THAT SURVEILLANCE, OUTREACH AND MORE DISPENSARIES WILL DEFINITELY BE IN THE PROGRAM. ON MOBILE MEDICAL UNITS, UNHCR HAS BEGUN PURCHASING TEN MOBILE MEDICAL UNITS (REF C) AND FIVE MOBILE VETERINARY UNITS. ICRC NOW HAS THREE UNITS STAFFED WITH LOCAL DOCTORS (AT SALARIES OF ALMOST \$600 PER MONTH). THE WORLD CONCERN HAS ORDERED SIX UNITS. VACCINATIONS HAVE ALREADY STARTED IN BOTH THE NWFP AND BALUCHISTAN WITH WHO TEAMS IN THE FIELD. THERE IS SOME MEASLES VACCINE (ABOUT 5000 DOSES) IN RAWALPINDI WAITING TO GO TO BALUCHISTAN BY AIR FOR IMMEDIATE USE TO AVOID THE NEED FOR A COLD CHAIN.  
KING

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